

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION INTEREST AND DIVIDENDS TAX RETURN IRS ADJUSTMENT ONLY

FOR DRAUSE ONLY

For	the CA	LENDAR year $f 2005$ or other taxable period $f 1$	beginning		and ending						
STEP 1	LAST NAME FIRST NA		FIRST NAME	E & INITIAL			SOCIAL SECURITY NUMBER				
Please Print or	LAST NAME FIRST NAME			& INITIAL SP		SPOU	OUSE'S SOCIAL SECURITY NUMBER				
Туре	NAME OF PARTNERSHIP OR FIDUCIARY FE					FEDE	EDERAL EMPLOYER IDENTIFICATION NUMBER				
	NUMBER & STREET ADDRESS					DEPARTMENT IDENTIFICATION NUMBER (DIN)					
	ADDRESS (Continued)										
	CITY/TOWN, STATE & ZIP CODE										
STEP 2 Entity Type & Special Return Type	1 INDIVIDUAL 3 PARTNERSHIP 6 % of NEW HAMPSHIRE Ownership Interest Tax FORMS MAILING ADDRESS, CITY/TOWN, STATE & ZIP CODE			est	Initial Return ————————————————————————————————————	Day Ye	Established NH Residency Abandoned NH Residency SSN form to report IRS adjustment.				
STEP 3	COMPLETE THE SECOND PAGE OF THIS RETURN BEFORE PROCEEDING TO STEP 4										
STEP 4	11			WOCEE	DING TO STEP 4		11		$\overline{}$		
Figure Your Tax, Credits, Interest and Penalties	 Net Taxable Income (From Line 10) New Hampshire Interest and Dividends Tax 					"					
	40	(Line 11, if positive, multiplied by 5%)		. (////////////////////////////////////			12				
	13	Payments: (a) Tax paid with Application for Extension		13(a)							
		 (b) Payments from this year's Estimated Tax		13(b)							
				13(c)							
				13(d)			13				
	14						14				
	15	Additions to Tax: (a) Interest (b) Failure to Pay (c) Failure to File		15(a)		<u>///////</u>					
				15(b)							
				15(c)	15(c)						
	(d) Underpayment of Estimated Tax		15(d)			15					
STEP 5	16	(a) Subtotal Due (Line 14 plus Line 15)									
Figure Your Net				16(a)		<u> </u>					
Balance Due or Overpay- ment	(b) Return Payment Made Electronically16 Net Balance Due [Line 16(a) minus Line 16(b)]					16(b)					
	16	(Make Check Payable to State of New Hampsh			PAYTHIS AMOU	NT 🗲	16				
	17	OVERPAYMENT [Line 12 plus Line 15 minus Line 13 and Line 1	6(b)]	17							
	18	Amount of Line 17 to be applied to: (a) Next year's tax liability					18(a)				
		(b) Refund - Please allow 12 weeks for processing			DO NOT PAY		18(b)				
FOR DRAUS	E ONLY	Under penalties of perjury, I declare that I have									
		prepared by a person other than the taxpayer,	this decla	ration	is based on all informa	tion of v	vhich the prepare	er has know	rledge.		
	Signature (in ink) AND TITLE, IF FIDUCIARY Date			Signature (in ink) of Paid Preparer Other Than Taxpayer Date							
	X						s.raqayor				
		NH DEPT OF REVENUE ADMINISTRATION MAIL DOCUMENT PROCESSING DIVISION TO: PO BOX 2072				*ambei					
				Preparer's Address							
		CONCORD NH 03302-2072			City/Town, State & Zip Code			DP-	-10		



Enter Line 10 amount on Page 1, Step 4, Line 11.

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION REPORT OF INTEREST AND DIVIDENDS INCOME IRS ADJUSTMENT ONLY

	Please Read Instructions before you begin		duciarias Cas Instructions'					
		1(a)						
	Dividend Income. Enter the amount from Lir Federal Tax Exempt Interest Income. Enter the							
, ,	Subtotal Interest and Dividend Income. [Sun							
	List Taxable Annuities or Actual Cash & Property Distributions From S-Corporations, Partnerships and Fiduciaries: Entity Codes: 2 = S-CORPORATIONS; 3 = PARTNERSHIPS; 4 = TRUSTS OR ESTATES; 5 = OTHER							
ENTITY CODE	II PAYER'S IDENTIFICATION NUMBER		IV DISTRIBUTION AMOUNT					
	Total from suppleme	ental schedule attached						
2 Total	l Distributions				2			
		total						
4 List	payers and amounts of interest and/or divide	on Line:	s 1(a), 1(b), 1(c) ano/or ∠:]					
REASON CODE	NAME OF PAYER			NT				
				+				
				+				
	-			+				
				+				
				+				
4/-\0b4	Compatibility of the Compatibi	N		-				
	total of non-taxable income above (Sum of Co	·		-				
4(b) Total	I non-taxable income from supplemental sch	edule (attached)	4(b)					
4(c)Non-	-taxable income subtotal of Lines 4(a) plus 4	l(b)	4(c)					
4(d) Part-year resident non-taxable income prorata share								
4 Tota	al Non-Taxable Amount [Sum of Line 4(c) plu		4					
5 Gros	ss Taxable Income (Line 3 minus Line 4)		5					
6 Less: \$2,400 for Individual, Partnership and Fiduciary; \$4,800 for Joint filers					6			
7 Adju	usted Taxable Income (Line 5 minus Line 6)		7					
Cr	neck here to be removed from mailing list.							
8 Con	ntributions to Qualified Investment Capital Com	·····						
В	lind Spouse Blind 65 (or over Year of bir	ed						
9 Che	9 Check the exemptions that apply. Multiply the total number of boxes checked above x 1,200= 9							
10 Net	Net Taxable Income (Line 7 minus Line 9). If less than zero enter amount in parenthesis							

FORM ROC-DP-10 NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

REPORT OF CHANGE INTEREST AND DIVIDENDS TAX RETURN - 2005

IRS ADJUSTMENT ONLY

Com-
mon
Errors

The following is a list of the most common mistakes made by taxpayers when filing a New Hampshire Interest and Dividends Tax return. These, along with other errors, may cause the return to be considered an "incomplete return" which may result in the assessment of interest and penalties. To ensure that you have filed a complete return, carefully follow the general and line-by-line instructions and be sure you have done the following:

Have you signed and dated the return in ink?

If this is a joint return, has your spouse included his/her social security number, signed and dated the return in ink?

If there is a balance due of \$1.00 or greater, have you enclosed a check for the total amount due?

Did you make the check payable to the State of New Hampshire?

Is the written amount on the check the same as the numeric amount?

Have you signed and dated the check?

Have you enclosed both pages of the Form DP-10?

Did you mistakenly send a payment in the amount of your credit or refund? If you would like to make an additional payment please use Form DP-10-ES.

Who Must File A Return

INDIVIDUALS: Individuals who are residents or inhabitants of NEW HAMPSHIRE for any part of the tax year must file providing they received more than \$2,400 of gross taxable interest and/or dividend income for a single individual or \$4,800 of such income for a married couple filing a joint New Hampshire return. (Part-year residents see below.) If the amount on Line 7 is \$0 or less you are not required to file an Interest and Dividends Tax Return.

PARTNERSHIPS, LLC's, ASSOCIATIONS, TRUSTS AND FIDUCIARIES: Please see separate tables in this booklet regarding "WHO" and "WHAT" is taxable. LLC's filing as Corporations are requested to file an Interest and Dividends Tax Return.

To determine whether a return must be filed, you should complete Page 2, Lines 1 - 7.

Joint **Filers**

To ensure your payments are credited to your account, the sequence of names and social security numbers must be consistent on all Interest and Dividends Tax estimates, extensions and returns

Part Year Resident

For New Hampshire Interest & Dividends Tax purposes, a "part year resident" is someone who has permanently established residency

in New Hampshire during the year or who has permanently abandoned residency in New Hampshire during the year or who has permanently abandoned residency in New Hampshire during the year. If you **established** residency after January 1st of this tax year check the "Initial Return" box and enter the date of residency in Step 2. If you **abandoned** residency during the year, check the "Final Return" box and enter the date in Step 2. A temporary absence for any length of time does not change your state of residency. If you are unsure whether you are a resident of New Hampshire, please call the Customer Service (603) 271-2191, Monday through Friday, 8:00 a.m. to 4:30 p.m. Only the interest and dividend income earned during that portion of the year for which they were a New Hampshire resident is taxable. Part-year residents are entitled to the full \$2,400 exemption (or \$4,800 for joint filers) and the full amount for the exemptions shown on line 9 of the return Line 9 of the return.

Part-year residents must file a return if, during the entire year, their adjusted taxable income was over \$2,400 (or over \$4,800 for joint

When To File

Pursuant to RSA 77:24-b and 77-A:10, a Report of Change must be filed with the Department no later than 6 months from receipt of a final determination of adjustments from the Internal Revenue Service.

Where To File

NH DEPT OF REVENUE ADMINISTRATION DOCUMENT PROCESSING DIVISION

PO BOX 2072 CONCORD NH 03302-2072

FACSIMILE DOCUMENTS ARE NOT ACCEPTED

Extension To File

New Hampshire does not require taxpayers to file an application for an automatic 7-month extension of time to file provided that the taxpayer has paid 100% of the Interest and Dividends Tax determined to be due by the due date of the tax.

If you need to make an additional payment, you must file a Form DP-59-A along with the payment or e-file your payment on-line at www.revenue.nh.gov. This application and payment must be postmarked on or before the due date of the tax. Failure to pay 100% of the tax due by the original due date will result in the assessment of interest and may result in the assessment of penalties. You are not required to attach a copy of your federal extension to your return.

Confidential Information

Tax information which is disclosed to the New Hampshire Department of Revenue Administration is held in strict confidence by law. The information may be disclosed to the United States Internal Revenue Service, agencies responsible for the administration of taxes in other states in accordance with compacts for the exchange of information, and as otherwise authorized by New Hampshire RSA 21-J:14.

Security Numbers

Social

Disclosure of social security numbers is mandatory under Department of Revenue Administration rules Rev. 221.02, 221.03 10/03. This information is required for the purpose of administering the tax laws of this state and authorized by 42 U.S.C.S. § 405 (c)(2)(C)(i). The failure to provide social security numbers may result in a rejection of a return or application. The failure to timely file a return or application complete with social security numbers may result in the imposition of civil or criminal penalties, the disallowance of claimed exemptions, exclusions, credits, deductions or adjustments that may result in increased tax liability.

Amended Returns

If you discover an error was made on your return after it has been filed, an amended New Hampshire return should be promptly filed by completing a corrected Form DP-10 and by checking the "AMENDED" box in Step 2 on the return. New Hampshire does not have a separate form for amended returns.

Rounding

Money items on all Interest and Dividends Tax forms may be rounded off to the nearest whole dollar.

IRS Report Change

To report a change to your Interest and Dividends Tax Return for years 1994 to present, (which resulted from a federal audit) file a separate report of change, Form ROC-DP-10, for each year. To report a change for taxable periods prior to 1994 contact the Department for the appropriate forms and instructions. To file a report of change on an Interest and Dividends Tax return, you will need to use the federal adjustment and a copy of your return as originally filed or previously adjusted. When filing the completed ROC-DP-10, you must sign in ink and include the IRS form reporting the change. Follow the line by line instructions when filling out the report of change. An incomplete ROC will not be accepted.

Need **Forms**

To obtain additional forms or forms not contained in this booklet, you may visit our web site at www.revenue.nh.gov or call (603) 271-2192. Copies of the state tax forms may also be obtained from any of the 22 Depository Libraries located throughout the State. (Call Customer Service at (603) 271-2191 for a list of Depository Libraries.)

Need Help

Call Customer Service at (603) 271-2191, Monday through Friday, 8:00 am to 4:30 pm. All written correspondence to the Department should include the taxpayer name, federal employer identification number, department identification number or social security number, the name of a contact person and a daytime telephone number.